

**DEPARTMENT OF SOCIAL AND HEALTH SERVICES
MEDICAL ASSISTANCE ADMINISTRATION
Olympia, Washington**

To: Neurodevelopmental Centers
Managed Care Plans
CSO Administrators
Regional Administrators

Memorandum No: 01-68 MAA
Issued: November 26, 2001

For Information Call:
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From: Thomas W. Bedell, Acting Assistant Secretary
Medical Assistance Administration (MAA)

Subject: Clarifying Coverage Limitations for Neurodevelopmental Centers

The purpose of this memorandum is to clarify the limitations to MAA-covered services provided by a Neurodevelopmental Center.

What is being clarified?

The following text has been reformatted to correspond with language in WAC 388-545-0900:

Page	Old Text	New Text
7	<p>MAA pays only for covered services listed in this section when they are:</p> <ul style="list-style-type: none">• Within the scope of an eligible client's medical care program;• Medically necessary and prescribed by a physician, physician's assistant (PA), or an advanced registered nurse practitioner (ARNP);• Begun within 30 days of the date prescribed; and• For conditions resulting from injuries and/or medically recognized diseases and defects.	<p>MAA pays only for covered services listed in this section when they are:</p> <ul style="list-style-type: none">• Within the scope of an eligible client's medical care program; <u>and</u>• Medically necessary and prescribed by a physician, physician's assistant (PA), or an advanced registered nurse practitioner (ARNP). <p><u>MAA recommends that services:</u></p> <ul style="list-style-type: none">• <u>Begin</u> within 30 days of the date prescribed; and• <u>Are</u> for conditions resulting from injuries and/or medically recognized diseases and defects.

Attached is replacement page 7/8 for MAA's Neurodevelopmental Centers Billing Instructions, dated September 2000. To obtain this memorandum electronically, go to MAA's website at <http://maa.dshs.wa.gov> (Click on the Provider Publications/Fee Schedules link).

Attachment